

## **Application Data Sheet**

### **Application Information**

Application number::	09/919,768
Filing Date::	07/31/01
Application Type::	Regular
Subject Matter::	Utility
Suggested classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R??::	
Number of CD disks::	
Number of copies of CDs::	
Sequence Submission::	
Computer Readable Form (CRF)?::	
Number of copies of CRF::	
Title::	COMPUTER IMPLEMENTED METHOD OF MANAGING INFORMATION DISCLOSURE STATEMENTS
Attorney Docket Number::	021737-000530US
Request for Early Publication::	No
Request for Non-Publication::	No
Suggested Drawing Figure::	10
Total Drawing Sheets::	23
Small Entity?::	Yes
Latin name::	
Variety denomination name::	
Petition included?::	No
Petition Type::	
Licensed US Govt. Agency::	
Contract or Grant Numbers One::	

Secrecy Order in Parent Appl.: No

### **Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Jeffry  
Middle Name:: J.  
Family Name:: Grainger  
Name Suffix::  
City of Residence:: Portola Valley  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of Mailing Address:: 95 Palmer Lane  
City of Mailing Address:: Portola Valley  
State or Province of mailing address:: CA  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 94028

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: James  
Middle Name:: R.  
Family Name:: Shay  
Name Suffix::  
City of Residence:: Seattle  
State or Province of Residence:: WA  
Country of Residence:: US  
Street of Mailing Address:: 1515 Madrona Drive  
City of Mailing Address:: Seattle

State or Province of mailing address:: WA  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 98122

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Cecily  
Middle Name:: Anne  
Family Name:: Snyder  
Name Suffix::  
City of Residence:: San Francisco  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of Mailing Address:: 545 Arguello Boulevard, #4  
City of Mailing Address:: San Francisco  
State or Province of mailing address:: CA  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 94118

### **Correspondence Information**

Correspondence Customer Number:: 20350

### **Representative Information**

Representative Customer Number:: 20350

### **Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application is a	Continuation-in-part of	09/733,616	12/07/2000

**Foreign Priority Information**

Country::                                      Application number::                                      Filing Date::

**Assignee Information**

Assignee Name::                                      FIRST TO FILE INC.  
Street of mailing address::                                      3355 Edison Way  
City of mailing address::                                      Menlo Park  
State or Province of mailing address::                                      CA  
Country of mailing address::                                      US  
Postal or Zip Code of mailing address::                                      94025